RECEIVED CENTRAL FAX CENTER DEC 2 3 2004

PETITION FOR EXTENSION OF	Apphication Number Fring Date First Named traventur Bearings Name	09/973,897 10/11/2001 Mikhall Boroditsky Wang, Quan Zhen 2633
PETITION FOR EXTENSION THE UNDER 37 CFR 1.136(a)	Group/Art Unit Attorney Docket ID	2633 Beroditsky 2000-0578

	UNDER 37 CFR 1.	,136(2)	Attorney Decker in				
•			d the eat	iod for filing	e response in		
	This is a request under 3 the above identified app	7 CFR 1.136(a) to excens the po-				
	the above-locations						
•	The requested extension	37 CFR 1.17	(a)(1)			1	
	I I TWO MOTTURE	27 CER 1.1	7(a)(1)	•			
	Three month	s 37 CFR 1.1	7(s)(1) 7(a)(1)				
	☐ Five month	9 3, 0					
	Applicant is a smi	all antity under	37 CFR .0 and 1.2	7-			
	A EUISII Gund 4	-				•	
•	is enclose	d ty been filled in	this application	•			
	Fee: \$120		nelosed or pitherwi	se provided	for, the		
•	If the Fee for this ex Commissioner is au	thorized to cha	irge the required fe	e against De	positive		
	Commissioner is au 500732 of Henry T.	Brendzel.				1	
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•	applicat	II.	anner!				
	attorne	y or agent of re y or agent und	er 37 CFR 1.34(a).				
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			SUBMITTED BY	Regist	ration Humber		
	Printed Name		h 10	Dans	17/2/150		
	Signature	Bery!	houde	<u></u>	:2660		
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PAGE 2/2 * RCVD AT 12/23/2004 9:44:45 AM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/0 * DNIS:8729306 * CSID:956 547 1550 * DURA ON (mm-ss):01-20							
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Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE [OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE OR BASIC FEE BASIC FEE 370.00 740.00 FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X42= X84= OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR * If the difference in column 1 is less than zero, enter "0" in column 2 OR TOTAL TOTAL CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY SMALL ENTITY OR (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI-⋖ REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE EN **PREVIOUSLY AFTER EXTRA** FEE FEE AMENDMENT **PAID FOR** Total Minus X\$18= X\$ 9= OR Independent Minus X84= X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OF TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL RATE TIONAL **PREVIOUSLY EXTRA AFTER AMENDMENT** PAID FOR FEE FEE ENDM Minus Total X\$18= X\$ 9= OR Minus Independent X84= X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE **AFTER PREVIOUSLY EXTRA** ENDMENT AMENDMENT PAID FOR FEE FEE Total Minus • X\$ 9= X\$18= OR Independent Minus =-X84= X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR

""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

OR

TOTAL

TOTAL

ADDIT, FEE